Maine Health Data Processing Center

Presentation to L.D. 1818 Workgroup
May 10, 2012

Michael Brannigan
DPC Board Chair

DPC - Background

- Established by statute in 2001.
- Public/Private Entity
 - ▼ Onpoint (MHIC) Technical Skills and History with MHMC
 - ▼ MHDO Regulatory Authority and HIPAA Safe Harbor Protection
- Purpose: Create a publicly available Claims dataset
 - Commercial Insurers & TPAs
 - **Medicare**
 - **x** MaineCare

Work of the DPC

- Relates Specifically to the All Payer Claims Database
 - × Collects Medical, Rx, Dental Claims and Enrollment from over 100 Commercial payers and TPA for anyone residing in Maine.
 - Aggregates millions of records and implements several layers of quality checks to ensure Accuracy and Quality.
 - Creates a completed, "ready-to-go" dataset for the MHDO
 - MHDO makes the dataset available to the public.

Funding for the DPC

• 40% Onpoint:

Onpoint contribution based on assumption it would be able to make up its investment by purchasing the claims database from MHDO and providing analytic services on behalf of customers such as employer groups, providers, and payers.

• 60% MHDO:

- Uses funds from assessments to Payers and Providers.
- Uses revenue from the sale of the All Claims Dataset to researchers and commercial entities.
- × <u>NOTE</u>: MHDO also paid 100% of cost for Provider Linkage crosswalk.

Assessments from other states:

As recognition of the value the DPC partnership played in its growth outside Maine, Onpoint negotiated financial assessments that were passed through to the DPC and helped offset the costs of operating the database in Maine.

DPC Board

- "mini" MHDO Board made up of various constituencies:
 - Payers, Providers, Consumers, Employers
 - MHDO & Onpoint Leadership
- The Role: Provided Oversight to the DPC
 - Data completeness
 - × Data quality
 - **×** Timeliness
 - Financial oversight
- Additionally:
 - ➤ Most members had technical backgrounds and could delve into issues deeper than MHDO/Onpoint Boards while still anticipating issues that might impact their constituencies.
 - Sounding board new ideas, changes, and challenges
 - Heard presentations from industry researchers on how data were being used or could be used.

The Evolution of the DPC

- Maine is a leader in the All Claims Data world. As other states followed, tools, technology, and processes evolved.
- Uses for the data have also grown, namely provider and member linkage and timeliness has become critical.

Desire to make data more accessible to end users.

Strengths of the DPC

- MHDO's and Onpoint's strong connection and commitment to Maine.
- Quality checks Onpoint's experience working with Maine claim data.
- MHDO's legal authority to collect, store, and release member level claims data (HIPAA).
- Good stewards of the data no data breaches.
- Experience and connections with MaineCare and Medicare data.
- DPC/MHDO is the only central repository of Commercial, MaineCare, and Medicare data.

Challenges for DPC

- Releasing member level data with the ability to link to other datasets, yet with patient protections.
- Ability to link provider data to other datasets.
- Continued data stewardship no data breaches while making the data easily accessible to users. This aspect cannot be overstated.
- Timely availability of data Commercial, MaineCare, and Medicare.
- Collecting data in an efficient, cost effective way that it is not overly burdensome to submitters, yet gives users relevant data.